



Provider Enrollment Checklist for Provider Type 32 Specialty 932

Ambulance, Air or Ground

The following is a list of required enrollment documents for this provider type. Please note, provider type 32 specialty 932 is for Ambulance, Air or Ground. Community Paramedicine services are not emergency services and are provided by provider type 32 specialty 249. A copy of each document listed below must be included with your provider enrollment or revalidation.

If you have any questions, please contact Provider Customer Service at (877) 638-3472 from 8:00 a.m. to 5:00 p.m. Monday through Friday.

In-State Ambulance, Air or Ground

- Documentation showing provider's Taxpayer Identification Number (SS-4 or CP575 or W-9)
- State of Nevada Division of Public and Behavioral Health Emergency Medical Systems Permit **OR** Southern Nevada Health District Emergency Medical Service Permit
- Nevada Secretary of State Business License

Out-of-State Ambulance, Air or Ground Provider

- Documentation showing provider's Taxpayer Identification Number (SS-4 or CP575 or W-9)
- A permit to provide emergency medical services issued by provider's home state
- Business License in home state

Out-of-State and Out-of-Catchment Urgent/Emergent Enrollment

Full Nevada Medicaid enrollment is not required for out-of-state, out-of-catchment providers that render urgent/emergent services to recipients outside of Nevada borders.

If you are enrolling to be reimbursed for urgent/emergent services provided to a Nevada Medicaid recipient, please complete an Urgent/Emergent enrollment.

The following documentation will need to be submitted along with the urgent/emergent enrollment.

- Proof of Medicaid Enrollment in Home State
The proof must show the rendering provider's name and National Provider Identifier (NPI) and your State's Medicaid name and be dated within 5 years from the date of service.
- Documentation showing Taxpayer Identification Number (SS-4 or CP575 or W-9)
- Voided Check or Bank Letter to Confirm Electronic Funds Transfer (EFT) Information
- Letter of intent including information on recipient such as name, Nevada Medicaid ID number, dates of service, CPT/HCPCS/revenue codes, etc.

Resources:

The [Provider Enrollment](#) webpage provides instruction materials that will assist providers with enrolling in Nevada Medicaid.

You do not need to submit this checklist with your enrollment or revalidation.